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RADER FISMAN AND GRA

PAGE 01/07

Docket No.: TEI-0135

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Kazuo Imose

Group Art Unit: 4153

Application No.: 10/551,668

Confirmation No.: 5514

Filing Date: September 30, 2005

For: EXAMINATION APPARATUS FOR
SLEEP RESPIRATORY DISTURBANCE AND
THERAPEUTIC SYSTEM

REQUEST FOR CORRECTED FILING RECEIPT

VIA FACSIMILE: 571-273-3201 (7 pages, including cover)
Attn: PCT Section, Customer Service

Commissioner for Patents
P.O. Box 1450
Washington, D.C. 22313-1450

Sir:

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the following, which is incorrectly entered. We are also enclosing a copy of the executed declaration showing the correct data.

Error:

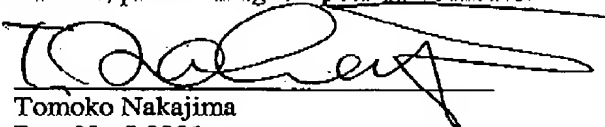
1. Title

Correct data to title:

1. EXAMINATION APPARATUS FOR SLEEP
RESPIRATORY DISTURBANCE AND
THERAPEUTIC SYSTEM

3. The correction is due to an error by the USPTO. If any fee is due, please charge Deposit Account No. 18-0013.

Dated: February 6, 2008


Tomoko Nakajima
Reg. No. L0231

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/551,668	09/30/2005	3736	1860	TEI-0135	4	13	6

CONFIRMATION NO. 5514

23353
RADER FISHMAN & GRAUER PLLC
LION BUILDING
1233 20TH STREET N.W., SUITE 501
WASHINGTON, DC 20036

FILING RECEIPT

OC000000019225998

Date Mailed: 06/15/2006

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Kazuo Imose, Tokyo, JAPAN;

Power of Attorney: The patent practitioners associated with Customer Number 23353.

Domestic Priority data as claimed by applicant

This application is a 371 of PCT/JP04/04712 03/31/2004

Foreign Applications

JAPAN 2003-098992 04/02/2003

If Required, Foreign Filing License Granted: 06/10/2006

The country code and number of your priority application, to be used for filing abroad under the Paris Convention, is **US10/551,668**

Projected Publication Date: 09/21/2006

Non-Publication Request: No

Early Publication Request: No

DATE

Title

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JUN 16 2006
USPTO

~~Sleep respiratory disorder examination device and treatment system~~Preliminary Class
600*"Examination apparatus for sleep
respiratory disturbance and
therapeutic system"***PROTECTING YOUR INVENTION OUTSIDE THE UNITED STATES**

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PTO/SB/106 (5-00)

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特許出願宣言書及び委任状

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As a below named inventor, I hereby declare that:

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My residence, post office address and citizenship are as stated next to my name.

下記の名称の発明について、特許請求範囲に記載され、且つ特許が求められている発明主題に関して、私は、最初、最先且つ唯一の発明者である（唯一の氏名が記載されている場合）か、或いは最初、最先且つ共同発明者である（複数の氏名が記載されている場合）と信じている。

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

"EXAMINATION APPARATUS FOR SLEEP
RESPIRATORY DISTURBANCE AND
THERAPEUTIC SYSTEM"

上記発明の明細書はここに添付されているが、下記の箱がチェックされている場合は、この限りでない：

the specification of which is attached hereto unless the following box is checked:

☐ _____ の日に出願され、
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_____ であり、且つ
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as United States Application Number or
PCT International Application Number
PCT/JP2004/004712 and was amended on
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私は、上記の補正書によって補正された、特許請求範囲を含む上記明細書を検討し、且つ内容を理解していることをここに表明する。

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

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Prior Foreign Application(s)

外国での先行出願

Priority Not Claimed

優先権主張なし

2003-098992

JAPAN

02/April/2003

(Number)
(番号)(Country)
(国名)(Day/Month/Year Filed)
(出願日/月/年)(Number)
(番号)(Country)
(国名)(Day/Month/Year Filed)
(出願日/月/年)

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(出願番号)(Filing Date)
(出願日)(Application No.)
(出願番号)(Filing Date)
(出願日)

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(Application No.)
(出願番号)(Filing Date)
(出願日)(Status: Patented, Pending, Abandoned)
(現況: 特許許可、係属中、放棄)(Application No.)
(出願番号)(Filing Date)
(出願日)(Status: Patented, Pending, Abandoned)
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (list name and registration number).

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直通電話連絡先：(氏名及び電話番号)

Direct Telephone Calls to: (name and telephone number)

唯一または第一発明者氏名		Full name of sole or first inventor	
発明者の署名		Inventor's signature	
日付			Date
住所			
国籍			
郵便の宛先			
第二共同発明者がいる場合、その氏名		Full name of second joint inventor, if any	
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(Supply similar information and signature for third and subsequent joint inventors.)